Mental Health Planning & Advisory Council

## Vision

Plan, Advocate, Evaluate
Mission

To advocate for a system that supports persons impacted by mental disorders on their journeys to achieve the highest quality of life possible by promoting evidence-based, cost-effective, individualized mental health services.

Cathii Nash, Chair 3908 East 17<sup>th</sup> Spokane, WA 99223

Mental Health Planning and Advisory Council
Holiday Inn in SeaTac
17338 International Boulevard
May 20, 2009
Minutes

PRESENT: Helen Nilon, Cathii Nash, Dwight McClain, Eleanor Owen, Dan Clement, Diane

Eschenbacher, Dorothy Trueblood, Becky Bates, Judie Rich, Don Nichols, Tom

Saltrup, Danny Eng, Kathryn Carlton and Bianca Stoner

EXCUSED: Vanessa Lewis, Rick Crozier, Cheri Dolezal, Fran Collison, Jo Ellen Woodrow,

John Furze, Bill Waters, Thressa Alston and Michael Paulson

UNEXCUSED: Traci Adair, Brien Critchlow, Annie Conant, Shirley Havenga, Tamara Johnson,

Barbara Putnam

GUESTS: Clifford Thurston

STAFF: Christina Carter, Hank Balderrama and Aaron Wolfman

AGENDA ITEM	DISCUSSION LEADER	DISCUSSION	DECISIONS, ACTIONS, ASSIGNMENTS
9:30 – 10:00 AM - WELCOME AND INTRODUCTIONS	Cathii Nash – Chair	Jo Ellen Woodrow and Don Nichols are Co-Chairs of an Ad-Hoc Committee to nominate Chair and Vice- Chair replacements for Cathii and Rick before they retire.	Think of nominees.
10:00 -10:45 AM	Cathii Nash – Chair Hank All	Discussed improving narratives in RSN FBG proposals for next year for those RSN's that are less than adequate Suggestion was made to have some accountability for training providers. How does the training improve client services? Outcome measures are expensive and time consuming and are not feasible in these tight budget times.  Continue to score RSN FBG Proposals.	
10:45 11:00 AM Break		•	
11:00 AM – 12:00 PM	All	General Comments and Questions:  1.Chelan-Douglas  There was a lack of narrative. Not enough information and detail. Lack of diversity for funding consumer groups. Nothing is mentioned about sexual minorities and their	

AGENDA ITEM	DISCUSSION LEADER	DISCUSSION	DECISIONS, ACTIONS, ASSIGNMENTS
		challenges.	
12:00 – 1:00 PM LUNCH			
	All	Comments and Questions (con't)  2. Clark  Good descriptive narrative. Funding source is low. Good documentation of alternative sources of funding.  3. Grays Harbor  Insufficient narrative. \$2,000 for manuals. Would like to know more about manual. More information needed. Numbers don't match. Money allocated and number of persons trained vary from RSN to RSN. Costs of psychiatric services vary from region to region across the state.  4. Greater Columbia  Proposal should be thrown out. 7 out of 10 counties didn't follow instructions. They didn't know what they were doing. The plan was written following bad information; misinformed. Narrative insufficient, costs aren't clearly defined — plan needs to be rewritten or funding may be held up. School support - \$16,000 for counselor. Where is the funding coming from? Flesh out narrative more. Keep kids in school and provide counseling. Psychiatric services — are persons served duplicated. Case management — Whitman County — people don't want to be "cases" to be managed. Flex Funds — transitory or permanent, providing money for meds or rent. It's up to us to educate RSN's on writing proposals. Comment and Questions (con't)  5. King County  Well written, easy to identify FBG priority issues, lack of focus on families - \$25,000 for consumer driven services — not very well designed. Terms need to be defined. CCORS — more parent and family participation. \$25,000 for consumers is a token amount — not enough to fully fund a consumer organization.	
		MIO-CTP – needs to be state funded.  6. North Central	

AGENDA ITEM	DISCUSSION LEADER	DISCUSSION	DECISIONS, ACTIONS, ASSIGNMENTS
		Exorbitant fees – need to look at programs more closely. Lots of money to train 2 people. Money needs to be reconciled. Pick people who are long time residents to be considered for training, they're more likely to stay around. Need more information on telehealth. Clarify whether ARNP is psychiatric or medical.	
		7. North Sound	
	All	Cudo's to North Sound. Should serve as model to other RSN's. Clubhouses need more funding. Peer run and Peer supported drop in centers are popular and not as difficult to run as clubhouses. \$10,000 request for wraparound needs to be outlined in more detail – clarification on what they're asking for. FBG funding for culturally competent services acceptable. TRIP needs more funding and to clarify who they're serving, i.e. non- Medicaid. Need more info on Everett Housing Authority/ The Hope Options Program.	Need Hank to get progress report on Telehealth.
		8. Peninsula	
		Not well written. Needs better narrative.  Needs better clarification of narrative to determine what the money will accomplish.  Has trouble spending money on a program, when it can be received from the state for free – peer training. They need to re-write the FBG Proposal.	
		9. SouthWest	
		Something wrong with process, technical ability, report incomplete. Worked on continuity of care. Not family orientated.	
		10. Spokane	
		Lack of narrative, overall vision. Use critical eye to examine amount of money specific programs are getting – lack of diversity. Homeless Outreach Team – numbers don't add up. \$20,000 for Camas Path- verification of program effectiveness. No programs for children in Spokane for non-Medicaid.	
		11. Thurston / Mason	
		Likes Flex funds, free MH clinic. Increase free clinic money. Family/Consumer Advocacy, not functioning, not	

AGENDA ITEM	DISCUSSION LEADER	DISCUSSION	DECISIONS, ACTIONS, ASSIGNMENTS
	All	much support for kids and families, \$14,000 is nothing. Diversion Services – What are they doing?  12. Timberland  Likes range of programs for little money. Would like to see greater detail.  No funding for consumer organizations.  Day Support-Are we paying for Day Support Program operating costs, such as rent and utilities? Flex Funds-Willapa-Who are they funding, non-Medicaid?  No children or sexual minorities.  Questioned training Shoalwater Bay Indian Tribe MH Clinician in evidence based practices; Are they culturally competent?  Medical help for children is unrecognized.	
3:30 PM Adjourn	_		

The next meeting will be:
Date: June 17, 2009
Time: 4:00 pm
Location: Heathman Lodge, Vancouver, WA